Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND								
1 Dat	te of Request: 12/14/07	al/Patent # 09/971,857						
3 Please refund the following fee(s):		4 PAP NUM	ER BER	5 DATE FILE		TRUOMA		
Filing					\$			
	Amendment					\$		
	Extension of Time					\$		
	Notice of Appeal/Appeal					\$		
х	Petition				06/14/0	7 \$	1,500.00	
	Issue					\$		
	Cert of Correction/Terminal I	Disc.				\$		
	Maintenance					\$		
	Assignment					\$		
	Other					\$		
		7 TOTAL AMOUNT OF REFUND		\$ 1	,500.00			
		8 TO BE REFUNDED BY:						
10 REASON:				Т	Treasury Check			
	Overpayment		X Credit Deposit A/C #:					
	Duplicate Payment	,		9 5	5 0	4 1	5 7	
х	No Fee Due (Explanation):							
Petition to revive is unnecessary since this application is not in fact abandoned.								
11 REFUND REQUESTED BY:								
TYPED/PRINTED NAME: Frances Hicks TITLE: Petitions Examiner								
SIGNATURE:								
OFFICE: Office of Petitions								
THIS SPACE RESERVED FOR FINANCE USE ONLY: APPROVED: DATE:								

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

PORM PTO 1577 (01/90) Office of Finance Refund Branch Crystal Park One, Room 802B